



## Local Small Business Reserve Program (LSBRP)

*This form contains the questions required to self certify a business with the Local Small Business Reserve Program (LSBRP). After completing the form, log onto the LSBRP website and self certify your business. The LSBRP registration link is:*

***www.montgomerycountymd.gov/lbrp • 240-777-9916***

### Vendor Details

Business Type: ☐ Wholesale ☐ Retail ☐ Manufacturing ☐ Service ☐ Construction

Are you a broker? ..... ☐ YES ☐ NO

Is the Business independently owned and operated? ..... ☐ YES ☐ NO

Is the Business a subsidiary of another firm? ..... ☐ YES ☐ NO

Is the Business dominant in its field of operation? ..... ☐ YES ☐ NO

Is the physical Business location(s) only in Montgomery County? ..... ☐ YES ☐ NO

Business Inception Date \_\_\_\_\_

Total # of employees on payroll: \_\_\_\_\_ Total # of employees employed in the company: \_\_\_\_\_

Gross sales for the most recent three years: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Sales of the most recent three years in the County: \$ <sup>2007</sup> \_\_\_\_\_ \$ <sup>2008</sup> \_\_\_\_\_ \$ <sup>2009</sup> \_\_\_\_\_  
2007 2008 2009

If the business has been in operation less than a year:

First year projected or estimated gross sales: \$ \_\_\_\_\_

First year projected or estimated sales in the County: \$ \_\_\_\_\_

### Registration Information

County Vendor # \_\_\_\_\_ (enter vendor ID # if you are already a registered Montgomery County vendor)

Federal Tax ID #: \_\_\_\_\_

Form W-9 #: \_\_\_\_\_

Business Structure: ☐ Proprietorship ☐ Partnership ☐ Corporation ☐ Limited Liability Company

### Business Information

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX \_\_\_\_\_

Email: \_\_\_\_\_ Web Address: \_\_\_\_\_

Name(s) of owners/partners/proprietors \_\_\_\_\_

Are you a certified minority business enterprise? ..... ☐ YES ☐ NO

Commodity code(s) (if known):

_____	_____	_____
_____	_____	_____
_____	_____	_____

State the type of goods or services your business provides if you do not know the Commodity Code:

\_\_\_\_\_

\_\_\_\_\_

## Certification Agreement

- ☐ I am aware that I have the responsibility of notifying the Department of General Services immediately, via email at **lsbrp@montgomerycountymd.gov** or in writing to Montgomery County, Local Small Business Reserve Program, 255 Rockville Pike, Suite 180 Rockville, MD 20850-4168, if the business ceases to be independently owned and operated or becomes a subsidiary of another business.
- ☐ I hereby certify that the information provided is a true and correct statement of facts. I, as a designated legal representative of the company, further certify that this firm shall abide by and be subject to all applicable Federal, State and Local Laws and regulations pertaining to any subsequent contract that may be issued.
- ☐ Upon request of Montgomery County Government, the Business must promptly provide to the Department of General Services documentation on all of its business location(s) (if it has more than one), number of employees by location, annual gross revenue of the business for the past three fiscal years. The preferred documents are copy of a lease, Maryland Unemployment Insurance Contribution Report (summary or quarterly), and Financial Statement/Tax Returns. At the discretion of the Department of General Services, an alternative type of document might be accepted.
- ☐ I acknowledge that by registering with the program, I give the Montgomery County Department of General Services permission to obtain my business data from the State of Maryland's Department of Labor, Licensing and Regulation.

Signature (Name): \_\_\_\_\_

Business Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please select the category that best describes your level of involvement:

☐ Owner ☐ President/CEO ☐ Senior Executive ☐ None ☐ Other: \_\_\_\_\_

☐ Check this option to have your Company Name and Public Information available in Vendor Search.  
Displaying this information can serve as a valuable networking resource.

Once the self-registration application has been received and processed, the applicant will receive an email notification message with your account information, including system login and password. Montgomery County, Maryland reserves the right to review or deny registrations at any time.

**[www.montgomerycountymd.gov/lsbrp](http://www.montgomerycountymd.gov/lsbrp)**